


**APPLICATION DATA SHEET**

Electronic Version v14

Stylesheet Version v14.0

<b>Title of Invention</b>	METHOD AND SYSTEM OF DATA TRANSFER FOR EFFICIENT MEMORY UTILIZATION	
Application Type : regular, utility		
Attorney Docket Number : BUR920030037US1		
Correspondence address:		
Customer Number:	29,625	
Inventors Information:		
<u>Inventor 1:</u>		
<b>Applicant Authority Type:</b>	Inventor	
<b>Citizenship:</b>	US	
<b>Given Name:</b>	Christos	
<b>Middle Name:</b>	John	
<b>Family Name:</b>	Georgiou	
<b>Residence:</b>		
<b>City of Residence:</b>	Scarsdale	
<b>State of Residence:</b>	NY	
<b>Country of Residence:</b>	US	
<b>Address-1 of Mailing Address:</b>	19 Arlington Road	
<b>Address-2 of Mailing Address:</b>		
<b>City of Mailing Address:</b>	Scarsdale	
<b>State of Mailing Address:</b>	NY	
<b>Postal Code of Mailing Address:</b>	10583	
<b>Country of Mailing Address:</b>	US	
<b>Phone:</b>		
<b>Fax:</b>		
<b>E-mail:</b>		
<u>Inventor 2:</u>		
<b>Applicant Authority Type:</b>	Inventor	
<b>Citizenship:</b>	US	
<b>Given Name:</b>	Valentina	
<b>Family Name:</b>	Salapura	

**Residence:**

**City of Residence:** Chappaqua  
**State of Residence:** NY  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 31 Brook Lane  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Chappaqua  
**State of Mailing Address:** NY  
**Postal Code of Mailing Address:** 10514  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

**Attorney Information:**

practitioner(s) at Customer Number:

29,625



as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

**Assignee 1:**

**Organization Name:** International Business Machines Corporation  
**Address-1 of Mailing Address:** New Orchard Road  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Armonk  
**State of Mailing Address:** NY  
**Postal Code of Mailing Address:** 10504  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**